Case 16-12648 Doc 1 Filed 04/13/16 Entered 04/13/16 18:27:31 Desc Main Document Page 1 of 60

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
our full name		
Write the name that is on your government-issued	Rosalia First name	First name
oicture identification (for example, your driver's	Thothano	Thornamo
	Middle name	Middle name
	Lopez	
neeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years	Rosalia Lopez Vazquez	
nclude your married or naiden names.		
Only the last 4 digits of your Social Security number or federal ndividual Taxpayer dentification number ITIN)	xxx-xx-3149	
	Vrite the name that is on your government-issued bicture identification (for example, your driver's cense or passport). Bring your picture dentification to your neeting with the trustee. All other names you have used in the last 8 years include your married or naiden names. Only the last 4 digits of your Social Security number or federal individual Taxpayer dentification number	Vite the name that is on our government-issued bicture identification (for example, your driver's cense or passport). Bring your picture dentification to your neeting with the trustee. All other names you have ised in the last 8 years include your married or naiden names. Only the last 4 digits of your Social Security number or federal individual Taxpayer dentification number Rosalia First name Middle name Lopez Last name and Suffix (Sr., Jr., II, III) Rosalia First name First name First name All other name All other names you have ised in the last 8 years include your married or naiden names. Rosalia Lopez Vazquez **Rosalia Lopez Vazquez** **Rosalia Lopez Vazquez**

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Case number (if known)

Debtor 1 Rosalia Lopez

		About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	I	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	E	Business name(s)
		EINs	Ē	EINs
5.	Where you live	2138 Western Ave.	ı	f Debtor 2 lives at a different address:
		Waukegan, IL 60087		
		Number, Street, City, State & ZIP Code	1	Number, Street, City, State & ZIP Code
		Lake County	-	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	l i	f Debtor 2's mailing address is different from yours, fill it n here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	1	Number, P.O. Box, Street, City, State & ZIP Code
ò.	Why you are choosing this district to file for	Check one:	(Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	I	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
			_	

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Document Case number (if known) Debtor 1 Rosalia Lopez

Par	Tell the Court About	our B	ankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> a page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankru box.	otcy
	choosing to file under	■ C	hapter 7				
		□с	hapter 11				
		□с	hapter 12				
		□с	hapter 13				
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	ically, if you are paying the fee yo	with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, or lf, your attorney may pay with a credit card or check.	money
						n, sign and attach the Application for Individuals to	Pay
			ŭ		s (Official Form 103A). lived (You may request this option	only if you are filing for Chapter 7. By law, a judge	e mav.
			but is not requapplies to you	uired to, waive y ur family size an	your fee, and may do so only if you nd you are unable to pay the fee in	ur income is less than 150% of the official poverty installments). If you choose this option, you must al Form 103B) and file it with your petition.	line that
9.	Have you filed for bankruptcy within the	■ No					
	last 8 years?	☐ Ye					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business	□ Ye	es.				
	partner, or by an affiliate?						
	annate:		Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your		Go to li	ne 12.			
	residence?	■ Ye	l laa	ur landlord obta	ained an eviction judgment against	you and do you want to stay in your residence?	
		— 16		No. Go to line			
			_				
				Yes. Fill out Indibankruptcy pet		udgment Against You (Form 101A) and file it with	this

Document Page 4 of 60 Case number (if known) Debtor 1 Rosalia Lopez Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate 13. Are you filing under Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Rosalia Lopez Document Page 5 of 60 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Rosalia Lopez Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will be available for Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Rosalia Lopez Signature of Debtor 2 Rosalia Lopez Signature of Debtor 1 Executed on April 13, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Rosalia Lopez Document Page 7 of 60 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert	Tomei	Date	April 13, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Robert To	mei		
Printed name			
Tomei Lav	v		
Firm name			
223 N Milv	vaukee Ave., Ste. 14		
Gurnee, IL	₋ 60031		
Number, Street,	City, State & ZIP Code		
Contact phone	847-596-7494	Email address	robert@tomeilawfirm.com
6310339			
Bar number & S	tate		

		Docume	ent Page 8 of 60	
Fill in this infor	mation to identify your	case:		
Debtor 1	Rosalia Lopez			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Che
				am

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

ı aı	t1: Summarize Your Assets		
		Your a Value of	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	23,510.86
	1c. Copy line 63, Total of all property on Schedule A/B	\$	23,510.86
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	28,358.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	35,992.71
	Your total liabilities	\$	64,350.71
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,605.02
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,657.50
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	, family, or

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

4,319.28 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		10 of 60		
Fill in this information to identify your case	and this filing:			
Debtor 1 Rosalia Lopez First Name	Middle Name Last Nam			
Debtor 2	Wildle Name Last Nam			
Spouse, if filing) First Name	Middle Name Last Nam	е		
United States Bankruptcy Court for the: NOR	THERN DISTRICT OF ILLINOIS			
Case number				☐ Check if this is an
				amended filing
Official Form 106A/B				
Schedule A/B: Propert	V			12/15
each category, separately list and describe item		ts in more than one cat	egory, list the asset in	
nink it fits best. Be as complete and accurate as partiformation. If more space is needed, attach a sepanswer every question.				
Part 1: Describe Each Residence, Building, Land	, or Other Real Estate You Own or Have	an Interest In		
Do you own or have any legal or equitable inter	est in any residence, building, land, or s	similar property?		
_	or in any recordence, building, land, or t	minu. proporty.		
No. Go to Part 2.				
☐ Yes. Where is the property?				
Part 2: Describe Your Vehicles				
□ No ■ Yes				
3.1 Make: Nissan	Who has an interest in the property		o not deduct secured cla	aims or exemptions. Put d claims on Schedule D:
Model: Sentra SR 4D	Debtor 1 only		Creditors Who Have Clair	
Year: 2010	Debtor 2 only		urrent value of the	Current value of the
Approximate mileage: 120,000 Other information:	Debtor 1 and Debtor 2 only		ntire property?	portion you own?
Average condition	☐ At least one of the debtors and an	otner		
	Check if this is community prop (see instructions)	erty	\$5,200.00	\$5,200.00
3.2 Make: Chevrolet	Who has an interest in the property		o not deduct secured cla	
Model: Sonic	■ Debtor 1 only		ne amount of any secure Creditors Who Have Clair	d claims on Schedule D: ms Secured by Property.
Year: 2015	Debtor 2 only	C	urrent value of the	Current value of the
Approximate mileage: 19,664	Debtor 1 and Debtor 2 only		ntire property?	portion you own?
Other information:	At least one of the debtors and an	other		
Good condition	☐ Check if this is community prop (see instructions)	erty	\$11,723.00	\$11,723.00
. Watercraft, aircraft, motor homes, ATVs a				
Examples: Boats, trailers, motors, personal w	atercraft, fishing vessels, snowmobile	es, motorcycle access	ories	
■ No				

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 Rosalia Lopez 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$16,923.00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Regular household furnishings, including queen size bed, full-size \$450.00 beds, 2 couches, kitchen table with 4 chairs - average condition. Cookingware, silverware, and dishware \$125.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... Two flatscreen TV's, 47" inch, 20" - good condition, laptop \$250.00 computer (poor condition). 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Various articles of wearing apparel for one adult female, and one \$650.00 minor child Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe.....

13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

page 2

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Debtor '	1 Rosalia Lopez	<u>z</u>		Boodinent	Case number (if known)	
□ Y€	es. Describe					
■ No			-	ı did not already list, i	ncluding any health aids you did not list	
				om Part 3, including a	ny entries for pages you have attached	\$1,475.00
Part 4:	Describe Your Financia	al Assets	;			
Do you	own or have any leg	gal or eq	quitable intere	est in any of the follow	/ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	a <i>mpl</i> es: Money you ha o			our home, in a safe dep	osit box, and on hand when you file your petit	tion
17. Dep	posits of money amples: Checking, sav institutions. If	vings, or	other financia		of deposit; shares in credit unions, brokerage	houses, and other similar
	es			Institution r	name:	
		17.1.	Checking	Checking Ending in	g Account: First Midwest Bank n 3859	\$4,007.32
		17.2.	Credit Unio	_	g Account: Consumer Cooperative nion - Account Ending in	\$5.54
	nds, mutual funds, or amples: Bond funds, ir	· publicl	y traded stoc	on Credit Ur	nion - Account Ending in	\$5.54
Exa ■ No	a <i>mples:</i> Bond funds, ir o	publici nvestmer	y traded stoc nt accounts wi	ks th brokerage firms, more	nion - Account Ending in	\$5.54
Exa ■ No □ Ye	amples: Bond funds, ir o es	publici nvestmer	y traded stoc nt accounts wi	ks th brokerage firms, more suer name:	ney market accounts	<u> </u>
Exa No Ye 19. Non joir	amples: Bond funds, ir o es n-publicly traded stoo nt venture	publici nvestmer	y traded stoc nt accounts wi	ks th brokerage firms, more suer name:	nion - Account Ending in	<u> </u>
Exa No Ye 19. Non joir	amples: Bond funds, ir o es n-publicly traded stoo nt venture	r publici nvestmen l ck and in	y traded stoc nt accounts wi nstitution or is nterests in in	ks th brokerage firms, more suer name: corporated and uninc	ney market accounts	<u> </u>
Exa No Ye 19. Non joir No Ye 20. Gov Ne No No No No No No No No No	amples: Bond funds, ir o es n-publicly traded stoo nt venture o es. Give specific infor vernment and corpor gotiable instruments ir n-negotiable instrument	r publicitivestments Rammation a Nammate bond and sude pents are the mation all mation	y traded stoc nt accounts wi nstitution or is nterests in in about them ne of entity: ds and other ersonal checken nose you cann bout them	ks th brokerage firms, more suer name: corporated and uninc negotiable and non-nes, cashiers' checks, pro	ney market accounts orporated businesses, including an intere	<u> </u>
Exa No Ye 19. Non joir No Ye 20. Gov Ne No No No No No No No No No	amples: Bond funds, ir o es	r publicitivestments Rammation a Nammate bond and sude pents are the mation all mation	y traded stocent accounts with accounts with an artifution or is about them the of entity: ds and other ersonal checkinose you cannot account the artifus and other the artifus and artifus and other the artifus and other the artifus and other the artifus and	ks th brokerage firms, more suer name: corporated and uninc negotiable and non-nes, cashiers' checks, pro	ney market accounts orporated businesses, including an intere % of ownership: egotiable instruments missory notes, and money orders.	<u> </u>
Exa Non Ye 19. Non joir No Ye 20. Gov Ne No Ye 21. Reti	amples: Bond funds, ir o es	mation a lssu	y traded stocent accounts with accounts with accounts with accounts with accounts with account and account account them	ks th brokerage firms, more suer name: corporated and uninc negotiable and non-nes, cashiers' checks, pro out transfer to someone	ney market accounts orporated businesses, including an intere % of ownership: egotiable instruments missory notes, and money orders.	st in an LLC, partnership, and
Exe No Ye 19. Non join No Ye 20. Gov Ne No Ye 21. Reti Exe	amples: Bond funds, ir o es	r publicitivestments ck and in mation a Nam ate bone noticle pents are the mation al Issue ccounts A, ERIS.	y traded stocent accounts with accounts with accounts with accounts with accounts with account them ac of entity: ds and other ersonal checken account them er name: bout them er name: s A, Keogh, 401	ks th brokerage firms, more suer name: corporated and uninc negotiable and non-nes, cashiers' checks, pro out transfer to someone	ney market accounts orporated businesses, including an intere % of ownership: egotiable instruments missory notes, and money orders. by signing or delivering them.	st in an LLC, partnership, and
Exa Non 19. Non joir No Ye 20. Gov Neg Noi Ye 21. Reti Exa No Ye 22. Sec You Exa No Exa No Exa No No No No No No No No No N	amples: Bond funds, ir o es	mation a Nam lessur the A, ERIS. Separate Type o	y traded stocent accounts with accounts with accounts with accounts with accounts in the account them the of entity: ds and other ersonal checken account them er name: s A, Keogh, 401 ely. f account: ents s you have ma	ks th brokerage firms, more suer name: corporated and unince megotiable and non-nes, cashiers' checks, proport transfer to someone (k), 403(b), thrift saving Institution rede so that you may content, public utilities (ele	ney market accounts orporated businesses, including an intere % of ownership: egotiable instruments missory notes, and money orders. by signing or delivering them.	st in an LLC, partnership, and

Official Form 106A/B Schedule A/B: Property page 3

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Case number (if known) Document

Debtor 1 Rosalia Lopez

	Rent	Residential Lease Agreement Securuity Deposit	\$600.00
23. Annuities No Yes		money to you, either for life or for a number of years)	
24. Interests in		n a qualified ABLE program, or under a qualified state tuition	program.
■ No □ Yes	Institution name and descr	ription. Separately file the records of any interests.11 U.S.C. § 521	(c):
■ No	uitable or future interests in proper	rty (other than anything listed in line 1), and rights or powers of	exercisable for your benefit
26. Patents, c <i>Examples</i> ■ No	opyrights, trademarks, trade secret	ts, and other intellectual property roceeds from royalties and licensing agreements	
Examples ■ No	franchises, and other general intander: Building permits, exclusive licenses, we specific information about them	ngibles cooperative association holdings, liquor licenses, professional lice	enses
Money or pro	perty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	ds owed to you e specific information about them, incl	luding whether you already filed the returns and the tax years	
■ No		isal support, child support, maintenance, divorce settlement, prope	erty settlement
Examples ■ No	ounts someone owes you : Unpaid wages, disability insurance p benefits; unpaid loans you made to s we specific information	payments, disability benefits, sick pay, vacation pay, workers' com someone else	pensation, Social Security
	n insurance policies : Health, disability, or life insurance; h	ealth savings account (HSA); credit, homeowner's, or renter's insu	ırance
■ Yes. Nar	ne the insurance company of each po Company name:	olicy and list its value. Beneficiary:	Surrender or refund value:
		State Farm - 5 year 0 benefit amount, no Maria Acosta	\$0.00

Debtor 1	Rosalia Lopez		Page 14 of 60	nber (if known)	
		American Health and Life Insurance Co 5 year term life policy, \$100,00 benefit. No cash value.		\$0.	00
		Merit Life Insurance - Term Life Poli 3 year, \$10,000 benefit amount, no o value		\$0.	00
If you somed		at is due you from someone who has died a living trust, expect proceeds from a life ins tion		entitled to receive property because	
Exam ■ No		s, whether or not you have filed a lawsuit ryment disputes, insurance claims, or rights		ient	
34. Other No		uidated claims of every nature, including	counterclaims of the debtor	and rights to set off claims	
■ No	nancial assets you of	•			
		of your entries from Part 4, including an			
Part 5: De	escribe Any Business-	elated Property You Own or Have an Interest Ir	. List any real estate in Part 1.		
	own or have any legal o to Part 6.	or equitable interest in any business-related pro	pperty?		
_	Go to line 38.				
		Commercial Fishing-Related Property You Own st in farmland, list it in Part 1.	or Have an Interest In.		
	•	gal or equitable interest in any farm- or c	ommercial fishing-related pro	operty?	
_	Go to Part 7. Go to line 47.				
	-				
Part 7:	•	You Own or Have an Interest in That You Did	Not List Above		_
		of any kind you did not already list? country club membership			
_	Give specific information	ion			
		All other property not already listed individually.	, none of which valued at	over \$100 \$500.	00
54. Add	the dollar value of a	of your entries from Part 7. Write that nu	mber here	\$500.00	

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 Rosalia Lopez

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$16,923.00		
57.	Part 3: Total personal and household items, line 15	\$1,475.00		
58.	Part 4: Total financial assets, line 36	\$4,612.86		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$500.00		
62.	Total personal property. Add lines 56 through 61	\$23,510.86	Copy personal property total	\$23,510.86
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$23,510.86

Official Form 106A/B Schedule A/B: Property page 6

		IAAAIII.	11 1000 1000	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Rosalia Lopez			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	ptions are	you claiming?	Check one only	, even if	your spouse is	s filing with	vou.
----	--------------------	------------	---------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2015 Chevrolet Sonic 19,664 miles Good condition	\$11,723.00		\$2,400.00	735 ILCS 5/12-1001(c)
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
	Various articles of wearing apparel for one adult female, and one minor	\$650.00		\$650.00	735 ILCS 5/12-1001(a)
child Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
	Checking: Checking Account: First Midwest Bank Ending in 3859	\$4,007.32		\$4,000.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Life Insurance: State Farm - 5 year	\$0.00		\$75,000.00	735 ILCS 5/12-1001(f)
	term, \$75,000.00 benefit amount, no cash value. Beneficiary: Maria Acosta Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	American Health and Life Insurance Co 5 year term life policy,	\$0.00		\$100,000.00	735 ILCS 5/12-1001(f)
	\$100,000.00 benefit. No cash value. Beneficiary: Maria Acosta Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	

Case 16-12648 Doc 1 Filed 04/13/16 Entered 04/13/16 18:27:31 Desc Main Document Page 17 of 60 Case number (if known) Rosalia Lopez Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Merit Life Insurance - Term Life** 735 ILCS 5/12-1001(f) \$0.00 \$10,000.00 Policy - 3 year, \$10,000 benefit amount, no cash value 100% of fair market value, up to Line from Schedule A/B: 31.3 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

	Do	ocument Page 1	8 of 60		
Fill in this information to identi	fy your case:				
Debtor 1 Rosalia Lo	nez				
First Name	Middle Name	Last Name		-	
Debtor 2					
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court f	or the: NORTHERN D	ISTRICT OF ILLINOIS			
, ,				-	
Case number					
(if known)					if this is an
				amend	ded filing
Official Form 106D					
Schedule D: Credit	tors Who Have	: Claims Secure	ed by Propert	У	12/15
Be as complete and accurate as positions needed, copy the Additional Page					
number (if known).					
1. Do any creditors have claims sec					
☐ No. Check this box and su	ubmit this form to the cour	with your other schedules.	You have nothing else t	to report on this form.	
Yes. Fill in all of the inform	nation below.				
Part 1: List All Secured Clair	ms				
2. List all secured claims. If a credit	or has more than one secure	d claim, list the creditor separate	Column A	Column B	Column C
for each claim. If more than one cred	litor has a particular claim, list	the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in all	phabetical order according to	the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Credit Acceptance	Describe the prope	rty that secures the claim:	\$17,153.00	\$11,723.00	\$5,430.00
Creditor's Name	2015 Chevrolet	Sonic 19,664 miles			
	Good condition	•			
25505 West 12 Mile Rd	As of the date you	file, the claim is: Check all that			
Suite 3000	apply.	ine, the claim is. Check all that			
Southfield, MI 48034	Contingent				
Number, Street, City, State & Zip Co					
Who owes the debt? Check one.	Disputed	To that are so to			
_	Nature of lien. Che				
Debtor 1 only	car loan)	ou made (such as mortgage or s	securea		
Debtor 2 only					
Debtor 1 and Debtor 2 only	_ ` `	ch as tax lien, mechanic's lien)			
At least one of the debtors and an	· ·		Monoy Socurity		
☐ Check if this claim relates to a community debt	Other (including	a right to offset) Purchase	wioney Security		
Opened 2/01/16					
Last Ac Date debt was incurred 3/14/16		of account number 0042	1		
<u> </u>					
2.2 Springleaf Financial S	Describe the prope	rty that secures the claim:	\$11,205.00	\$5,200.00	\$6,005.00
Creditor's Name		entra SR 4D 120,000	\$11,203.00	Ψ3,200.00	
	miles	illia SK 4D 120,000			
	Average condi	tion			
1828 Grand Ave	As of the date you	file, the claim is: Check all that			
Waukegan, IL 60085	apply. ☐ Contingent				
Number, Street, City, State & Zip Co					
rambor, direct, only, state a zip co	Disputed				
Who owes the debt? Check one.	Nature of lien. Che	eck all that apply.			
Debtor 1 only		ou made (such as mortgage or s	secured		
Debtor 2 only	car loan)	,			
Debtor 1 and Debtor 2 only	Statutory lien (su	ch as tax lien, mechanic's lien)			
☐ At least one of the debtors and an					

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Debtor 1 Rosalia	•	Lost Nove	Case number (if know)
First Name	Middle Name	e Last Name	
☐ Check if this claim community debt	relates to a	Other (including a right to offset)	Purchase Money Security
Date debt was incurre	Opened 4/01/15 Last Active 1/29/16	Last 4 digits of account num	ber 0962
	e of your form, add the	umn A on this page. Write that nun e dollar value totals from all pages	* -,

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Document	Page 2	of 60			
Fill ir	n this inforr	nation to identify your	case:					
Debte	or 1	Rosalia Lopez						
		First Name	Middle Name	Last Name				
Debte								
(Spous	se if, filing)	First Name	Middle Name	Last Name				
Unite	d States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF IL	LLINOIS				
_								
Case (if know	number _						Chook if this is an	
(11 1410)						_	Check if this is an amended filing	
							amended ming	
Offic	cial Forn	n 106E/F						
			ho Have Unsecured	d Claims			12/15	
nny ex Sched Sched eft. At name	tecutory cont lule G: Execu lule D: Credit ttach the Con and case nur	racts or unexpired leases tory Contracts and Unexpors Who Have Claims Sectinuation Page to this pagner (if known).	that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space is je. If you have no information to re	list executory of Do not include s needed, copy	ontracts on Schedule A/B: Prany creditors with partially seithe Part you need, fill it out, n	operty (Office cured claim umber the e	cial Form 106A/B) and a s that are listed in ntries in the boxes on	on the
Part		II of Your PRIORITY Un						
	•	ors have priority unsecure	d claims against you?					
	No. Go to P	art 2.						
	Yes.							
Part :	2: List A	II of Your NONPRIORIT	Y Unsecured Claims					
3. D	o any credito	ors have nonpriority unsec	cured claims against you?					
	☐ No. You ha	ve nothing to report in this p	art. Submit this form to the court with	h your other sche	edules.			
	Yes.							
u th	nsecured clair	m, list the creditor separately	aims in the alphabetical order of t y for each claim. For each claim liste ist the other creditors in Part 3.If you	ed, identify what t	ype of claim it is. Do not list clai	ms already ir	cluded in Part 1. If more)
							Total claim	
4.1	Cap1/ju	stice	Last 4 digits of ac	count number	3359		\$338.	.00
	Nonpriority	Creditor's Name One Retail Services	When was the dek	bt incurred?	Opened 11/01/15 Las 2/26/16	t Active		
		ke City, UT 84130					_	
	Number S	treet City State Zlp Code	As of the date you	ı file, the claim i	s: Check all that apply			
	Who incu	rred the debt? Check one.						
	Debtor	1 only	☐ Contingent					
	☐ Debtor	2 only	☐ Unliquidated					
	☐ Debtor	1 and Debtor 2 only	☐ Disputed					
		t one of the debtors and and	other Type of NONPRIO	RITY unsecured	d claim:			
		if this claim is for a comi	По					
	debt		☐ Obligations aris		ration agreement or divorce tha	t you did not		
		m subject to offset?	report as priority cla	aims				
	■ No		·	· ·	g plans, and other similar debts	i		
	☐ Yes		Other. Specify	Charge Acc	count		_	

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Case number (if know)

Debtor 1 Rosalia Lopez 4.2 \$594.00 Capital One Last 4 digits of account number 0608 Nonpriority Creditor's Name Attn: Bankruptcy Opened 3/01/10 Last Active Po Box 30285 When was the debt incurred? 1/19/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes **Chase Card Services** 4.3 Last 4 digits of account number 8232 \$5,513.00 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 3/01/04 Last Active Po Box 15298 When was the debt incurred? 1/19/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 **Comenity Bank/Carsons** Last 4 digits of account number 6438 \$3,384.00 Nonpriority Creditor's Name Opened 7/01/12 Last Active Po Box 182125 When was the debt incurred? 12/21/15 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Rosalia Lopez Case number (if know) 4.5 Comenity Bank/Harlem Furniture \$0.00 Last 4 digits of account number 0511 Nonpriority Creditor's Name Opened 1/01/07 Last Active Po Box 182125 When was the debt incurred? 4/22/08 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account Comenity Bank/New York & 3237 \$2,541.00 4.6 Company Last 4 digits of account number Nonpriority Creditor's Name Opened 1/01/04 Last Active Po Box 182125 When was the debt incurred? 1/11/16 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.7 Comenity Bank/vctrssec \$3,870.00 Last 4 digits of account number 8337 Nonpriority Creditor's Name Opened 6/01/03 Last Active Po Box 182125 When was the debt incurred? 11/09/15 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Rosalia Lopez Case number (if know) 4.8 \$0.00 Consumers Coop Cred Un Last 4 digits of account number 4001 Nonpriority Creditor's Name Opened 6/07/02 Last Active Po Box 9119 When was the debt incurred? 10/07/15 Waukegan, IL 60079 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Deposit Related** Other. Specify 4.9 **Infinity Healthcare Physicians** Last 4 digits of account number 8379 \$312.93 Nonpriority Creditor's Name 111 E. Wisconsin Ave., Suite 2100 When was the debt incurred? 08/27/2015 Milwaukee, WI 53202 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.1 Josefina Montero \$1,000.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 4722 85th Street When was the debt incurred? March 2015 Kenosha, WI 53142 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Personal loan ☐ Yes

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Debtor 1 Rosalia Lopez Case number (if know) 4.1 Kohls/Capital One 1972 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 9/01/03 Last Active Po Box 3120 When was the debt incurred? 11/05/11 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes Lake County Acute Care, LLP 9829 \$476.00 Last 4 digits of account number Nonpriority Creditor's Name 4350 Fowler Street, Suite 15 When was the debt incurred? 09/21/2015 Fort Myers, FL 33901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.1 \$669.21 Northshore Uni. Health Systems 7383 Last 4 digits of account number 3 Nonpriority Creditor's Name 23056 Network Place When was the debt incurred? 06/23/2015 Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes

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Nosalia Lopez			
Northshore Uni. Health Systems Nonpriority Creditor's Name	Last 4 digits of account number	7685	\$563.40
23056 Network Place Chicago, IL 60673	When was the debt incurred?	05/26/2015	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		
Northshore Uni. Health Systems	Last 4 digits of account number	7476	\$227.00
Nonpriority Creditor's Name 23056 Network Place Chicago II 60673	When was the debt incurred?	01/20/2016	
Chicago, IL 60673 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical		
Onemain Financial	Last 4 digits of account number	5445	\$9,132.00
Nonpriority Creditor's Name 6801 Colwell Blvd	_	Opened 7/01/15 Last Active	
Ntsb-2320 Irving, TX 75039	When was the debt incurred?	1/21/16	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin		
☐ Yes	■ Other Specify Unsecured		

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Debtor	1 Rosalia Lopez	——————————————————————————————————————	Case number (if know)				
4.1 7	Peoples Gas Nonpriority Creditor's Name	Last 4 digits of account number	0534	\$154.00			
	200 E Randolph St 20th Floor Chicago, IL 60601	When was the debt incurred?	Opened 6/07/14 Last Active 2/23/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Utility					
4.1	Springleaf Financial S Nonpriority Creditor's Name	Last 4 digits of account number	0951	\$2,565.00			
-	1828 Grand Ave Waukegan, IL 60085	When was the debt incurred?	Opened 4/01/15 Last Active 2/04/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	No	Debts to pension or profit-sharin					
	Yes	Other. Specify Note Loan					
4.1 9	Syncb/toysrus Nonpriority Creditor's Name	Last 4 digits of account number	9081	\$287.00			
	Attn: Bankrupty Po Box 103104 Roswell, GA 30076	When was the debt incurred?	Opened 7/01/07 Last Active 5/05/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	r 2 only Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other, Specify Charge Acc	count				

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Debtor 1 Rosalia Lopez 4.2 Synchrony Bank/ JC Penneys 5826 \$1,933.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankrupty Opened 6/01/03 Last Active Po Box 103104 When was the debt incurred? 3/11/16 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.2 Synchrony Bank/Sams Club 2197 \$1,317.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/01/07 Last Active Attn: Bankruptcy Po Box 103104 When was the debt incurred? 1/19/16 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 Synchrony Bank/TJX 7786 \$607.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 3/01/12 Last Active Po Box 103104 When was the debt incurred? 1/19/16 Roswell, GA 30076 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Case number (if know)

DCDIOI I	NOSalia L	.opez		Oasc II		
4.2	Target		Last 4 digits of account number	9766		\$367.00
	Mailstop B7	ditor's Name ial & Retail Services Γ PO Box 9475 s, MN 55440	When was the debt incurred?	Open 1/22/1	ed 9/01/15 Last Activ	e
	Number Street	City State Zlp Code	As of the date you file, the claim	is: Check	all that apply	
	_	the debt? Check one.	_			
	Debtor 1 onl	•	Contingent			
	Debtor 2 onl	•	Unliquidated			
	Debtor 1 and	•	Disputed			
		of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if thi debt	s claim is for a community	☐ Student loans			
		bject to offset?	☐ Obligations arising out of a separe report as priority claims	aration ag	reement or divorce that you did	not
	No		Debts to pension or profit-sharing	ng plans, a	and other similar debts	
	☐ Yes		Other. Specify Credit Card	t		
4.2	United Hos	pital System	Last 4 digits of account number	0011		\$142.17
	Nonpriority Cred	Avenue	When was the debt incurred?	05/27	/2015	
		VI 53143-5082 City State Zlp Code	As of the date you file, the claim	is: Check	all that annly	
		the debt? Check one.	76 of the date you me, the claim	io. Oncon	ан ини арргу	
	■ Debtor 1 onl	lv	☐ Contingent			
	☐ Debtor 2 onl	•	☐ Unliquidated			
	Debtor 1 and	•	☐ Disputed			
	_	of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
		s claim is for a community	☐ Student loans			
	debt	bject to offset?	Obligations arising out of a separeport as priority claims	aration ag	reement or divorce that you did	not
	■ No	ajour to onour.	Debts to pension or profit-sharing	ng plans, a	and other similar debts	
	☐ Yes		Other. Specify Medical			
	<u></u>		· · · 			
Part 3:		s to Be Notified About a Deb	t That You Already Listed bout your bankruptcy, for a debt that y	ou alrea	dv listed in Parts 1 or 2. For e	example, if a collection agency
have m	nore than one c		neone else, list the original creditor in you listed in Parts 1 or 2, list the add submit this page.			
Name an	d Address	(On which entry in Part 1 or Part 2 did you	list the o	riginal creditor?	
			ine <u>4.12</u> of (<i>Check one</i>):	Part 1: 0	Creditors with Priority Unsecure	d Claims
	lorizons Dri bus, OH 432	ve, Suite 101		Part 2: 0	Creditors with Nonpriority Unse	cured Claims
Colum	bus, O11 432		ast 4 digits of account number	98	329	
Part 4:	Add the Ar	mounts for Each Type of Un	secured Claim			
. Total th		certain types of unsecured clair	ns. This information is for statistical r	eporting	purposes only. 28 U.S.C. §15	9. Add the amounts for each
					Total Claim	
	6a.	Domestic support obligations		6a.	\$	0.00
	otal ims					
from Pa		Taxes and certain other debts	you owe the government	6b.	\$	0.00
	6c.	•	njury while you were intoxicated	6c.		0.00
	6d.	Other. Add all other priority unse	ecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a thro	ugh 6d.	6e.	\$	0.00

Official Form 106 E/F

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Debtor 1 Rosalia Lopez

					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ _	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	35,992.71
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	35,992.71

		I A A A III III .		
Fill in this infor	mation to identify your	case:		
Debtor 1	Rosalia Lopez			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Dominguez Housing LLC
c/o Amy M. Mennecke
4212 Old Grand Ave., Suite 103
Gurnee, IL 60031

State what the contract or lease is for
Annual residential lease agreement for property with common address 2138 Western Ave., Waukegan, IL
60085, expiration of June 30th, 2016.

		Documen	<u>it Page 31 of 6</u>	60	
Fill in this in	nformation to identify your	case:			
Debtor 1	Rosalia Lopez				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT C)F ILLINOIS		
Case numbe	er				
(if known)				☐ Check if this is amended filing	
Official	Form 106H				
		- l- 1 - u -			
Scheal	ıle H: Your Cod	eptors			12/15
1. Do yo No Yes 2. Withi Arizona,	nd case number (if known) ou have any codebtors? (If	Answer every question. you are filing a joint case, do lived in a community prop Nevada, New Mexico, Puer	perty state or territory? (rto Rico, Texas, Washingto	(Community property states and territories inclu	
in line 2	e again as a codebtor only i 16D), Schedule E/F (Official	f that person is a guaranto	or or cosigner. Make sure	your spouse is filing with you. List the perso re you have listed the creditor on Schedule D G). Use Schedule D, Schedule E/F, or Schedu	O (Official
	olumn 1: Your codebtor me, Number, Street, City, State and Zl	P Code		Column 2: The creditor to whom you owe to Check all schedules that apply:	he debt
21	rika Zavala I38 Western Ave., aukegan, IL 60085			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G Dominguez Housing LLC	

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Fill	in this information to identify your c	ase.						
	otor 1 Rosalia Lop							
	otor 2							
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS					
	se number nown)			☐ A su	mended pplemen	J	tpetition chapter ng date:	
	fficial Form 106I				MM	/ DD/ YY	YY	
S	chedule I: Your Inc	ome						12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sp ith you, do not include	oouse is livi e informatio	ng with yo	u, includ our spou	le information se. If more sp	n about your pace is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse		
	If you have more than one job,	Employment status	■ Employed			☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed		
	employers.	Occupation	Restaurant Mana	ger				
	Include part-time, seasonal, or self-employed work.	Employer's name	Mcdonalds					
	Occupation may include student or homemaker, if it applies.	Employer's address	1272 Delany rd Gurnee, IL 60031					
		How long employed t	here? 15 Years	, 0 Months	<u> </u>			
Par	t 2: Give Details About Mor	nthly Income						
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for any li	ine, write \$0) in the sp	pace. Include	your non-filing
-	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all emplo	yers for tha	t person	on the lines b	elow. If you need
					For Debto	r 1	For Debtor 2 non-filing sp	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2. \$	3,29	2.66	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3. +\$		0.00	+\$	N/A

3,292.66

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Rosalia Lopez	-	C	ase r	number (<i>if kr</i>	nown)				
					For	Debtor 1			Debtor		
	Cop	by line 4 here	4.	_	\$	3,292	2.66	\$		N/A	<u>\</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	687	7.64	\$		N/A	\
	5b.	Mandatory contributions for retirement plans	5b		<u> </u>		0.00	* * -		N/A	
	5c.	Voluntary contributions for retirement plans	5c		\$ 		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	i.	\$		0.00	\$	-	N/A	
	5e.	Insurance	5e) .	\$	(0.00	\$		N/A	<u></u>
	5f.	Domestic support obligations	5f.		\$		0.00	\$		N/A	_
	5g.	Union dues	5g	,	\$_		0.00	\$_		N/A	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$	(0.00	+ \$		N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	,	\$	687	7.64	\$_		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	:	\$	2,605	5.02	\$_		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$			\$		N/A	
	8b.	Interest and dividends	8b		\$ —).00).00	· \$_		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$		0.00	\$		N/A	_
	8d.	Unemployment compensation	8d	i.	\$		0.00	\$		N/A	
	8e.	Social Security	8e) .	\$	(0.00	\$		N/A	<u>\</u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$		0.00	\$		N/A N/A	
	8h.	Other monthly income. Specify:	8h	,	\$_		0.00	*		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	_		0.00	\$_		N/	Ά
			[_							
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,605.02	+ \$		N/A	= \$ _	2,605.02
11.	Sta Incl othe Do	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe					•	Schedule	e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain lies							12.	\$	2,605.02
13.	Do	you expect an increase or decrease within the year after you file this form No.	?							Combi	ined Ily income
	_	Voc Evoloin:									

Official Form 106I Schedule I: Your Income page 2

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FIII	in this information to identify your case:							
Deb	btor 1 Rosalia Lopez	Check if this is:						
D-1-	ht0		_	An amended filing				
	btor 2			A supplement show 13 expenses as of t	ving postpetition chapter			
(Opt	ouse, i ming/			To expended as of t	and following date.			
Unit	ited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING	DIS	_	MM / DD / YYYY				
	se numberknown)							
O	fficial Form 106J							
S	chedule J: Your Expenses				12/15			
Be info nur	as complete and accurate as possible. If two married people are formation. If more space is needed, attach another sheet to this formation. Market (if known). Answer every question.							
Par 1.	rt 1: Describe Your Household Is this a joint case?							
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household? □ No							
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate House	hold of Debt	tor 2.				
2.	Do you have dependents? ☐ No							
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?			
	Do not state the				□ No			
	dependents names.	Daughter			■ Yes			
					□ No			
		-			☐ Yes ☐ No			
					☐ No			
					□ No			
					☐ Yes			
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes				_ 100			
Est exp	rt 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you penses as of a date after the bankruptcy is filed. If this is a supple plicable date.							
the	clude expenses paid for with non-cash government assistance if a value of such assistance and have included it on Schedule I: You ficial Form 106I.)			Your expe	enses			
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	iclude first mortgage	4. \$		522.50			
	If not included in line 4:							
	4a. Real estate taxes		4a. \$		0.00			
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00			
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00			
_	4d. Homeowner's association or condominium dues		4d. \$		0.00			
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	5. \$		0.00			

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Debtor 1	Rosalia Lopez	Case n	umb	er (if known)	
6. Uti	lities:				
6a.		6	Sa.	\$	180.00
6b.	-			\$	0.00
6c.			ъ. 6с.	· -	
6d.			3d.		180.00
					0.00
	od and housekeeping supplies			\$	400.00
_	ildcare and children's education costs		8.	\$	300.00
Clo	othing, laundry, and dry cleaning		9.	\$	75.00
). Pe i	rsonal care products and services	1	١0.	\$	75.00
. Me	dical and dental expenses	1	11.	\$	125.00
	ansportation. Include gas, maintenance, bus or train not include car payments.		12.	\$	150.00
	tertainment, clubs, recreation, newspapers, maga		13.	·	
				· -	0.00
	aritable contributions and religious donations	1	14.	Φ	0.00
	surance.	udad in lines 4 on 00			
	not include insurance deducted from your pay or include insurance		-	¢	04.00
	a. Life insurance		āa.		21.00
	b. Health insurance		ōb.		0.00
	c. Vehicle insurance		ōс.	·	136.00
	d. Other insurance. Specify:		ōd.	\$	0.00
. Tax	xes. Do not include taxes deducted from your pay or	included in lines 4 or 20.			
Spe	ecify:	1	۱6.	\$	0.00
	tallment or lease payments:				
17a	a. Car payments for Vehicle 1	17	₹a.	\$	493.00
17b	o. Car payments for Vehicle 2	17	٧b.	\$	0.00
170	c. Other. Specify:	17	7c.	\$	0.00
	d. Other. Specify:		٥d.	\$	0.00
	ur payments of alimony, maintenance, and suppo				
	ducted from your pay on line 5, <i>Schedule I, Your I</i>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	18.	\$	0.00
9. Otl	ner payments you make to support others who do	not live with you.		\$	0.00
Spe	ecify:	1	19.		
	ner real property expenses not included in lines 4				
208	a. Mortgages on other property	20)a.	\$	0.00
20k	o. Real estate taxes	20	Db.	\$	0.00
200	c. Property, homeowner's, or renter's insurance	20	Oc.	\$	0.00
	d. Maintenance, repair, and upkeep expenses	20	d.	\$	0.00
	e. Homeowner's association or condominium dues		e.		0.00
				·	
. Ott	ner: Specify:		21. 「	тφ	0.00
2. Ca	Iculate your monthly expenses				
228	a. Add lines 4 through 21.			\$	2,657.50
	o. Copy line 22 (monthly expenses for Debtor 2), if ar	y, from Official Form 106J-2		\$,
	c. Add line 22a and 22b. The result is your monthly e			\$	2 657 50
220	o. Add thre 22a and 22b. The result is your monthly e	Aperises.		Ψ	2,657.50
3. Ca	Iculate your monthly net income.				
238	a. Copy line 12 (your combined monthly income) fro	m Schedule I. 23	Ва.	\$	2,605.02
	c. Copy your monthly expenses from line 22c above		Bb.	-\$	2,657.50
	, , , , , , , , , , , , , , , , , , , ,		-	<u> </u>	2,0000
230	c. Subtract your monthly expenses from your month	ly income.			
_50	The result is your <i>monthly net income</i> .	23	3c.	\$	-52.48
	•		-		
	you expect an increase or decrease in your expe				
	example, do you expect to finish paying for your car loan will differ to the terms of your mortgage?	thin the year or do you expect your mortgage	ge p	ayment to increase	or decrease because of
	dification to the terms of your mortgage?				
	No				
	Yes. Explain here:				

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Fill in this infor	mation to identify your c	ase:			
Debtor 1	Rosalia Lopez				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For	m 106Dec				
		n Individual	Debtor's Sch	nedules	12/15
You must file th obtaining mone years, or both. 1	is form whenever you fil	e bankruptcy schedules connection with a bank		/laking a false state	ement, concealing property, or 0, or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bar	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	alty of perjury, I declare t	hat I have read the sumi	mary and schedules filed	with this declaration	on and
-	salia Lopez		X		

Rosalia Lopez
Signature of Debtor 1

Date April 13, 2016

Signature of Debtor 2

Date

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Fill	l in this inform	nation to identify you	r case:			
_	btor 1	Rosalia Lopez				
		First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Ca	se number					
	nown)					check if this is an mended filing
	ficial For		Affairs for Individ	duals Filing for B	ankruntov	4/4
			Affairs for Individ			4/10
info	rmation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write you	
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married Not marri	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory ico, Texas, Washington and W	
	■ No					
	_	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$13,940.98	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Debtor 1 Rosalia Lopez

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions a exclusions)	Sources of in Check all that		tions
	last calen nuary 1 to	dar year: December	31, 2015)	■ Wages, commissions, bonuses, tips	\$37,512	.00	mmissions,	
				☐ Operating a business		☐ Operating a	a business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$40,449	.00	mmissions,	
				☐ Operating a business		☐ Operating a	a business	
	winnings. I	f you are fil	ing a joint ca	pensions; rental income; inte se and you have income that ome from each source separa	you received together, I	ist it only once under [ottery
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions a exclusions)	Sources of in Describe below		tions
	last calen nuary 1 to	dar year: December	31, 2015)	Federal & State Tax Return	\$4,243	.00		
		lar year be December		Federal Tax Return	\$2,293	.00		
Pari		Debtor 1's Neither Dindividual	s or Debtor 2 ebtor 1 nor I primarily for a	a personal, family, or househo	r debts? umer debts. Consumer old purpose."		I1 U.S.C. § 101(8) as "incurred	by an
			-	ore you filed for bankruptcy, d	id you pay any creditor	a total of \$6,425* or m	ore?	
		□ _{No.} □ _{Yes}		each creditor to whom you pa			ayments and the total amount y	
		* Subject	not include	reditor. Do not include payment payments to an attorney for to ton 4/01/19 and every 3 year	his bankruptcy case.		child support and alimony. Also of adjustment.	, do
	■ Yes.			or both have primarily const ore you filed for bankruptcy, d		a total of \$600 or more	∍?	
		■ No.	Go to line	7.				
		□ Yes	include pay				nt you paid that creditor. Do not . Also, do not include payments	
	Creditor's	s Name an	d Address	Dates of payme	ent Total amou	•	Was this payment for	

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7.	Within 1 year before you filed for bankruptc Insiders include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	rships of which securities; a	h you	are a genera managing a	I partner; corporations gent, including one for
	■ No□ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you		Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		ments or transfer a	ny property (on ac	count of a de	bt that benefited an
	No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you		Reason for Include credi	this payment tor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures					
9.	Within 1 year before you filed for bankruptc List all such matters, including personal injury of modifications, and contract disputes. No Yes. Fill in the details. Case title						or custody
	Case number	D	40th Indiaial Circuit I also				
	Denise McDuffey v. Rosalia Lopez 15AR516	Personal Injury	onal Injury 19th Judicial Circuit - Lake County, IL 18 N County Street, Waukegan, IL 60085)	☐ Pending ☐ On appeal ☐ Concluded	
						Voluntarily	Dismissed
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, fo	oreclosed, ga	arnish	ed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property		C	ate		Value of the
		Explain what happened	l				property
11.	 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 		mounts from your				
	Creditor Name and Address	Describe the action the	creditor took			ction was	Amount
				ti	aken		
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an □ No □ Yes		rty in the possessi	on of an ass	ignee	for the bene	fit of creditors, a

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Page 40 of 60 Case number (if known) Document Debtor 1 Rosalia Lopez

Pai	t 5: List Certain Gifts and Contributions	ıs			
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	uptcy,	did you give any gifts with a total value of more t	han \$600 per person?	?
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a totation.	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling? ■ No □ Yes. Fill in the details.	iptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers	s			
16.	consulted about seeking bankruptcy or p	prepari	id you or anyone else acting on your behalf pay ng a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	′ ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Tomei Law 223 N Milwaukee Ave., Ste. 14 Gurnee, IL 60031 robert@tomeilawfirm.com		Attorney Fees	12/29/2015, 3/16/2016	\$1,685.00
	CC Advising, Inc. 703 Washington Ave., Ste. 200 Bay City, MI 48708-5732 www.ccadvising.com		Credit counseling class	03/22/2016	\$9.76

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Debtor 1 Rosalia Lopez

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors. Do not include any payment or transfer that you No Yes. Fill in the details.	s or to make payments			transfer any prope	rty to anyone who
	Person Who Was Paid Address	Description and va	alue of any proper	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affai de as security (such as th	irs?			
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			ny property or eceived or debts hange	Date transfer was made
19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No □ Yes. Fill in the details.		property to a sel	f-settled trus	et or similar device	of which you are a
	Name of trust	Description and va	alue of the proper	ty transferred	d	Date Transfer was made
Par	8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Stora	ge Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accoun	ts; certificates of	-		
		Last 4 digits of account number	Type of account instrument	clos mov	e account was ed, sold, ed, or sferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No	ear before you filed for	bankruptcy, any s	safe deposit I	oox or other deposi	itory for securities,
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, State and ZIP Code)		escribe the co	ontents	Do you still have it?
22.	Have you stored property in a storage unit or ■ No □ Yes. Fill in the details.	place other than your	home within 1 yea	ar before you	filed for bankrupto	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or he to it? Address (Number, State and ZIP Code)		escribe the co	ontents	Do you still have it?

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Case number (if known) Document

Debtor 1 Rosalia Lopez

Pai	t 9: Identify Property You Hold or Control for S	omeone Else							
23.	Do you hold or control any property that someor for someone.	ne else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust					
	No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Pai	t 10: Give Details About Environmental Information	tion							
For	the purpose of Part 10, the following definitions a	ipply:							
	Environmental law means any federal, state, or letoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground	— ·						
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s		law, whether you now own, operate, o	or utilize it or used					
	Hazardous material means anything an environn hazardous material, pollutant, contaminant, or si		s waste, hazardous substance, toxic s	substance,					
Rep	ort all notices, releases, and proceedings that you	u know about, regardless of wher	n they occurred.						
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	■ No								
	Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Pal	t 11: Give Details About Your Business or Conn	·							
		•	of the fallerning connections to an						
27.	_ , , , , , , , , , , , , , , , , , , ,	•		/ business /					
	☐ A sole proprietor or self-employed in a tr	•	•						
	☐ A member of a limited liability company (☐ A partner in a partnership	LLO, or infined hability partnersh	ip (LLF)						
		vo of a corneration							
	☐ An officer, director, or managing executi	-							
	■ An owner of at least 5% of the voting or expression.	equity securities of a corporation							

Case 16-12648 Doc 1 Filed 04/13/16 Entered 04/13/16 18:27:31 Page 43 of 60 Case number (if known) Document Debtor 1 Rosalia Lopez No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Rosalia Lopez		
Rosalia Lopez	Signature of Debtor 2	
Signature of Debtor 1		
Date April 13, 2016	Date	
Did you attach additiona ■ No	pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Forn	າ 107)?
☐Yes		
Did you pay or agree to	ay someone who is not an attorney to help you fill out bankruptcy forms?	
No		
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)).

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-	Middle Name Last Name	Debtor 1	Rosalia Lopez			
(Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if	e: NORTHERN DISTRICT OF ILLINOIS Check if this is an		First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if	e: NORTHERN DISTRICT OF ILLINOIS Check if this is an	Debtor 2				
Case number Check if	Check if this is an	(Spouse if, filing)	First Name	Middle Name	Last Name	
(if known) Check if		United States Ba	ankruptcy Court for th	e: NORTHERN DISTRICT	OF ILLINOIS	
- Onloan						
amende	amended filing	(if known)				Check if this is an
						amended filing
Official Form 108		Official Fo	rm 108			

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:	List Your	Creditors	Who Have	Secured	Claims
---------	-----------	-----------	----------	---------	--------

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's Credit Acceptance name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt: 2015 Chevrolet Sonic 19,664 miles Good condition	 □ Retain the property and enter into a Reaffirmation Agreement. ■ Retain the property and [explain]: Keep and Pay 	■ Yes
Creditor's Springleaf Financial S	■ Surrender the property.	■ No
Description of property 120,000 miles Average condition	 ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	☐ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

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Det	otor 1	Rosalia L	opez	Case number (if known)	_	
Les	ssor's na	ame:	Dominguez Housing LLC	C		No
						Yes
	scriptior perty:	n of leased		agreement for property with common address kegan, IL 60085, expiration of June 30th, 2016.		
		Sign Below				
	•		ry, I declare that I have indic et to an unexpired lease.	ated my intention about any property of my estate that sec	ure	es a debt and any personal
X	/s/ R	osalia Lop	ez	X		
	Rosalia Lopez			Signature of Debtor 2		
Signature of Deb		ture of Debt	or 1			
	Date	April 1	3, 2016	Date		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-12648 Doc 1 Filed 04/13/16 Entered 04/13/16 18:27:31 Desc Main Document Page 50 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Rosalia Lopez		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	BTOR(S)	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filible rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy, of	or agreed to be paid	to me, for services ren	dered or to
				1,685.00	
	Prior to the filing of this statement I have received		\$	1,685.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person u	nless they are memb	pers and associates of 1	my law firm.
	☐ I have agreed to share the above-disclosed compensor copy of the agreement, together with a list of the na				w firm. A
5.	In return for the above-disclosed fee, I have agreed to r	ender legal service for all aspects	of the bankruptcy c	ase, including:	
1	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] 	tement of affairs and plan which r	nay be required;	-	ıptcy;
·	Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on ho	ons as needed; preparation a			
6. l	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.	ee does not include the following s schargeability actions, judic	service: ial lien avoidance	es, relief from stay	actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of an analyzing proceeding.	ny agreement or arrangement for p	payment to me for re	epresentation of the del	btor(s) in
Α	pril 13, 2016	/s/ Robert Tomei			
_	Date	Robert Tomei 6310			_
		Signature of Attorney Tomei Law			
		223 N Milwaukee A	Ave., Ste. 14		
		Gurnee, IL 60031 847-596-7494 Fax	: 847-589-2263		
		robert@tomeilawfi			
		Name of law firm			



223 N Riverside Dr. (Rt. 21), Suite 14 Gurnee, Illinois 60031 Telephone: 847.596.7494; FAX: 847.589.2263

Bankruptcy Retainer Agreement

OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.

In consideration for services to be rendered to the undersigned ("Client") by Robert J. Tomei Jr. ("Attorney") in connection with the representation of Client regarding bankruptcy matters, Client, agrees as follows:

- 1. Client understands that there are essentially four (4) Chapters of the Bankruptcy Code under which Client may seek relief:
 - a. Chapter 7 Liquidation (Individuals and Corporations)
 - b. Chapter 11 Protection and reorganization for Individuals and Business Corporations
 - c. Chapter 12 Family Farm or Fishermen
 - d. Chapter 13 Wage Earners Plan
- U.S. bankruptcy laws require that your financial information be subjected to a "Means Test" to determine your eligibility to file a bankruptcy case. Attorney cannot assure you in advance of the outcome of this Means Test, as it requires a complete review of your financial records and potential challenges from the U.S. Trustee.
- 2. Client understands that Client will be charged and agrees to pay all fees and costs in connection with Attorney's representation of the Client regarding the Client's bankruptcy matters prior to the filing of Client's case, with at a minimum, half due upon the retention of attorney's services, including without limitation, attorney's fees and court costs, as set forth below:
 - A. For those clients passing the Means Test (and for those where the Means Test is inapplicable):

Chapter 7 Individual with only consumer debt:

Minimum Fee: \$1,350.00 (attorney fee) + \$335 (filing fee) = \$1,685.00.

- Chapter 7 Joint Bankruptcy with only consumer debt:
 Minimum Fee: \$1,550 (attorney fee) + \$335 (filing fee) = \$1,885.00.
- Chapter 7 Individuals with business debts or over 50 creditors or Corporations:
 Minimum Fee: \$1,750.00 (attorney fee) + \$335.00 Filing fee = \$2,085.00.
- Chapter 7 Joint Bankruptcy with business debts or over 50 creditors or Corporations:
 Minimum Fee: \$1,950.00 (attorney fee) + \$335.00 Filing fee = \$2,285.00.
- Chapter 11 Small Business (9 or less employees or under 25 creditors) Minimum Fee: \$5,000.00 (attorney fee) + \$1,717 filing fee + \$175.00 per hour over 25 hours = \$6.717.00.

- Chapter 11 Large Business (10 or more employees) Minimum Fee: \$8,000.00 (attorney fee) + \$1,717.00 filing fee + \$175.00 per hour over 75 hours = \$9,717.00.
- Chapter 13 Wage Earner's Plan Minimum Fee: \$3,000.00 (attorney fee) + \$310.00 filing fee = \$3,310.00. (Fee negotiated upward if business assets are involved.)
- Additional Fees may apply in the event that:

Client(s) requires the filing of an emergency petition (\$100.00); flient(s) has more than 50 total creditors (\$100.00); and/or client(s) either desires or requires Attorney to procure his/her credit reports from a third party provider (\$30.00 individual filings/\$50.00 for joint filers); and/or client(s) owns a business. For each business association, there will be another \$375.00 charge).

B. Filing Fee Waiver Request: Should a filing fee waiver be requested and the filing fee not be included in the initial payment, and said request be denied by the court, Client acknowledges that s/he will be ordered to make installment payments according to the payment schedule provided by the court and that any prior down payment will not include filing fees.

C. Filing Fee Installment Payment Request: Client acknowledges that it is his/her responsibility to make the installment payments to the Clerk of the Bankruptcy Court. Client understands that should the Clerk not receive installment payments according to the schedule provided for in the Form 3A Filing Fee Installment Request Order, Client's case may be dismissed.

Client acknowledges that filing fee installment payments must be rendered according to the following guidelines: (1) Made via cashier's check, certified check, or money order. The Bankruptcy Clerk **DOES NOT** accept *personal checks*; (2) In 4 (four) equal amounts of \$83.75 according to the Form 3A Installment Filing Fee request Order, or a balance payoff should Client choose; (3) Made Payable to "Clerk, U.S. Bankruptcy Court", with Client's Bankruptcy case number in the memo line; (4) Sent Certified USPS to the US Bankruptcy Court, Eastern Division, 219 S. Dearborn, Chicago, IL 60604;

- D. Filing Fee Increases: Client understands and acknowledges that, from time to time, the United States Bankruptcy Court may periodically increase the filing fee(s) in connection with a bankruptcy filing under each Chapter. Client further understands and acknowledges that, should any such increase take place subsequent to entering into this Agreement and directly affect the Chapter that Client has retained Attorney's services for, Client is responsible for paying the difference of the increase to Attorney upon demand.
- Client is responsible for paying the difference of the increase to Attorney upon demand.

 E. A retainer of \$ 500- was paid on 12/29/2015. A retainer is an advance payment for Attorney services and the expenses Attorney may incur on Chents behalf and does not cover the court filing fee. Client understands that such amount will be credited against any amount Client owes Attorney and will not be refunded regardless if Client decides to cancel filing of the bankruptcy petition or not.

As explicitly discussed before entering into this arrangement, Attorney has determined that Client's interests in this matter and the nature of the matter in which Attorney has been retained are best served by the 'advance payment retainer' and so Attorney requires such payment in this engagement.

The retainer fee will **not** be held in a separate trust account, and becomes the property of Attorney, upon payment. As an alternative to the advanced payment retainer, the client could place money in a security retainer (i.e., escrow account) with the attorney to secure payment of fees in the future. This is a client choice if desired. The client is advised that the attorney could not represent client in this case without an 'advanced payment retainer' however, as the 'advanced payment retainer' is necessary to mitigate attorneys' exposure to risk in this matter. Therefore, Attorney has selected this method because he feels it is better suited to the client's ability to

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pay for services rendered, which is the primary reason it is being used in this case.

Client acknowledges that an 'advanced payment retainer' is recognized and approved under Illinois law as a present payment by you to Attorney, in exchange for Attorney's commitment to provide legal services to Client. As discussed above, ownership of this sum passes to Attorney immediately upon receipt of Client's advance payment retainer, and therefore the funds will not be held in a client trust account.

- F. Client understands that if any check given in payment to Attorney is returned for insufficient funds, Client agrees to immediately pay Attorney a \$40.00 fee in addition to the amount of the returned check. This payment and any future payments must therefore be made in cash, money order or debit card.
- G. In the event that Attorney is instructed or otherwise required to perform additional services in addition to those set forth in Paragraph 5 below, the following hourly rates shall apply: Robert J. Tomei Jr., \$225.00. This hourly rate shall be billed out in 1/10 per hour increments, or every 6 minutes.
- Attorney reserves the right to withdraw from Client representation if, among other things, Client fails to honor the terms of this Agreement, including non-payment of attorney and court filing fees; Client fails to cooperate or follow advice on a material matter, or if any fact or circumstance arises or is discovered that would render continuing representation unlawful or unethical. Client is aware of an ethical requirement imposed upon all attorneys in this state. If a Client, in the course of representation by an attorney, perpetrates a fraud upon any person or tribunal, the attorney is obligated to call upon the Client to rectify the same. If the Client refuses or is unable to do so, the attorney is required to reveal the fraud to the affected person or tribunal. Attorney may also terminate representation with Client(s)'s consent, or for cause, including: Client(s)'s failure to pay fees when due; Client(s) is in breach of this Contract; Client(s) is unresponsive or uncooperative; or circumstances would render Attorney's continuing representation unlawful or unethical. Client acknowledges that once the bankruptcy case is filed, Attorney's representation of Client(s) continues through the time Client(s) receives a discharge (except regarding violations of the permanent injunction as provided for in 11 USC § 524), the case is dismissed, the case is converted, or the Bankruptcy Court approves Attorney's withdrawal from representation. Client(s) may terminate Attorney's representation at any time.
- 4. Client(s) agrees to: Discuss with Attorney the Client(s)'s objectives in filing the case; Provide Attorney with full, accurate and timely information, financial or otherwise, including properly documented proof of income and two (2) years of tax returns; Cooperate with Attorney in preparing all required bankruptcy papers and documents, thoroughly reviewing drafts of documents, and promptly advising Attorney of corrections or additions needed; Timely provide Attorney with any additional documents requested by the bankruptcy trustee or other parties in interest; Notify Attorney of any change in address or telephone number; Appear punctually at the meeting of creditors with a picture identification card and proof of social security number; Comply with all orders of the Bankruptcy Court; and Complete the required instructional course in personal financial management. Failure of Client(s) to cooperate fully with Attorney or comply with any request of the bankruptcy trustee or court order may result in Attorney filing a motion with the Bankruptcy Court to withdraw from representation of Client(s).
- 5. Since the outcome of negotiations and litigation is subject to factors which cannot always be foreseen, Client acknowledges and understands that Attorney has made no promises or guarantees to Client concerning the outcome and is unable do so. Nothing in this Bankruptcy Retainer Agreement shall be construed as such a promise or guarantee.
- 6. Client agrees that Attorney may discard Client records within seven (7) years of the completion of the Client's bankruptcy case.
 - Attorney shall provide Client with the following services:
 - a. Review and analyze Clients financial circumstances based on information provided by

Client.

- b. If possible and to the extent possible, based on the information provided by Client, advise Client of the Client's options, including but not limited to bankruptcy options.
- c. Inform Client what information Client needs to provide Attorney in order to allow Attorney to provide appropriate advice and option information, in the event such information Client provided is insufficient.
- d. Advise Client of the appropriate requirements in connection with the filing of a bankruptcy case, including the duties of Client connected with such filing.
- e. Quote the Client an estimated fee, to the extent possible given the information provided by Client, for the attorney's service relative to providing bankruptcy assistance or other legal services to Client.
- f. Assuming that a U.S. Bankruptcy proceeding is filed, attorney services will include all typical attorney required participation in such proceeding, including but not limited to, appearances at Court hearings, preparation of legal memoranda, and communication with opposing counsel and parties.
- g. If Client's proceeding requires additional, but not customary work, Attorney will inform Client directly, and enter into a separate written contract for such services to fully apprise Client of the fees, payment requirements, and expected services to be provided.
- 8. Client acknowledges his/her obligation to make full and complete disclosure of all assets and all liabilities, and to provide all documents and information requested by the attorney, before the bankruptcy petition can be prepared and filed with the court.
- 9. Client acknowledges that he/she must attend pre-petition credit counseling before the bankruptcy petition can be filed. Client understands that he/she must also attend post-petition counseling after the bankruptcy petition is filed and within the time frame allowed by statute. Client acknowledges that the bankruptcy cannot be filed without the certificate of completion of the pre-bankruptcy credit counseling. Client understands that no discharge of debts will be issued if the post-bankruptcy credit counseling is not completed within the statutory time frame. Fees for all counseling services are the responsibility of the Client and are NOT INCLUDED in the retainer fee.
- 10. Client acknowledges that Attorney does not represent Client in any other type of case, lawsuit or proceeding other than Client's bankruptcy case. The attorney may make a special appearance in a court, other than the Bankruptcy Court, for the purpose of filing a notification of Client's bankruptcy proceedings, and to suggest to another court that Client's proceedings should be stayed. Sending or receiving any summons or complaint, or notifying the attorney of a pending lawsuit does not obligate Attorney to represent Client in that lawsuit or before that court. Any representation of Client in a state court proceeding, including without limitation: collection lawsuits, foreclosure lawsuits, and etc., is not included in this Bankruptcy Retainer Agreement. Any referral made to another attorney to represent Client is a courtesy only. The attorney is not associated with any other attorney outside of the undersigned attorney's law offices.
- Client acknowledges that Attorney will not research creditor information, including addresses, account numbers, or balances. The Client must provide this information to Attorney in writing. Failure to do so may result in unscheduled debts subject to non-dischargeability. Additionally, Client shall incur an additional fee of \$30.00 to the court, as well as additional fees to Attorney for additional services in connection with filing of amendments to Creditor lists as a result of Client's failure to provide sufficient creditor information prior to filing.
- 12. Client agrees that the following matters are not included within the scope of this Bankruptcy Retainer Agreement. Client agrees that, as to the matters listed below, Attorney will not take any action on Client's behalf, without a written request and/or a separate Retainer Agreement and possibly an additional retainer:

- a. Motions to revoke a discharge.
- b. Removal of a pending action in another court.
- c. Obtaining title reports.
- d. The determination of real estate or tax liens.
- e. Appeals to the BAP, District Court of Court of Appeals.
- f. Correcting credit reports.
- g. Obtaining credit reports.
- h. Negotiations with Check Systems regarding Client.
- i. Motions to Dismiss Client's bankruptcy case filed by the Trustee, U.S. Trustee, or any
- j. Any adversary proceeding filed by the Trustee, U.S. Trustee, or any other party on any basis, including, without limitations, proceedings to determine dischargeability of debts.
- k. Preparing reaffirmation agreements, negotiating the terms of reaffirmation agreements proposed by creditors, motions to redeem personal property, and negotiating reaffirmation agreements when Client's income is not sufficient to rebut the presumption of undue hardship and special circumstances do not warrant the signing of a reaffirmation agreement.
- Motion to impose or extend the bankruptcy stay.
- 13. Client understands that certain debts cannot be discharged in bankruptcy. Client agrees that Client is still liable to repay any debt not discharged in Client's bankruptcy. Client understands that the debts listed below are common examples of the types of debts that cannot be discharged in bankruptcy. Client further understands that the list of non-dischargeable debts may be expanded by legislation or court decisions and Attorney has no control over the type of debts that may be or become non-dischargeable.
 - a. Certain types of taxes, custom duties, or debts to pay taxes or custom duties.
 - b. Student loans.
 - c. Debts owed for spousal or child support.
 - d. Debts owed to the spouse, former spouse, or child in a domestic relations proceeding.
 - e. Debts arising from a previous bankruptcy wherein discharge of that particular debt was waived.
 - f. Debts owed for money, property, services, extension-or-removal, or refinancing of credit, if obtained by false pretenses, or false representations, or actual fraud.
 - g. Consumer debts for luxury goods obtained within ninety (90) days of the date of filing of the bankruptcy petition.
 - h. Cash advances obtained within seventy (70) days of the date of the filing of the bankruptcy petition.
 - Debts owed for fraud or defalcation while acting in a fiduciary capacity, or embezzlement or larceny.
 - j. Debts owed for fines, penalties, or forfeitures payable to and for the benefit of governmental entity.
 - k. Debts owed for death or personal injury arising from the operation of a motor vehicle, boat, or aircraft while intoxicated by drugs or alcohol.
- 14. Client understands that filing bankruptcy does not automatically discharge or remove liens from any real estate, nor does it automatically discharge or remove any liens from personal property such as automobiles. Client agrees that Attorney will not take any action to avoid (remove) any lien on real estate or personal property unless Client specifically authorizes Attorney to do so in writing. Client agrees that Attorney will rely on Client's statements concerning ownership of real property and any liens attached to Client's real property. Client agrees that no real estate title search will be conducted. Client agrees that Attorney will not conduct a public records search for lawsuits filed against Client or judgments granted against Client. Client must separately order and pay for a real estate title search, or public records search for lawsuits or judgments, if Client wishes to obtain one. Additionally, Client agrees and acknowledges that should Client wish to retain property

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secured by a lien of any kind, Client must continue making voluntary payments to the Creditor holding such lien through whatever means available to the Client, up to and including sending payment to the creditor in the form of check or money order via US Mail. Client agrees to hold Attorney harmless if client later discovers liens, lawsuits or judgments against Client or against Clients property.

- 15. Client understands that individuals who file for relief under the U.S. bankruptcy laws are subject to audits by the U.S. Trustee. If Client's case is selected for an audit, Client agrees to pay Attorney the customary hourly rate for representing Client in such audit.
- 16. Client understands that Attorney may charge additional fees if Client waits longer than ninety (90) days from the first date Attorney is retained to finalize the bankruptcy petition and schedules due to additional due diligence and other update work required to finalize the bankruptcy.
- 18. Client authorizes Attorney to share Client's collection letters, and other debt related materials, including, but not limited to credit reports and telephone records, with outside counsel, at no additional cost to Client, for purposes of ascertaining whether Client has any viable claims under the Fair Debt Collection Practices Act.
- 17. Client acknowledges that Client has read and understands all the terms contains in this Bankruptcy Retainer Agreement and that, whether written, spoken, recorded or transcribed by any other means, no other terms are made part of this Bankruptcy Retainer Agreement. Client is in agreement with the terms of this agreement and has signed on the signature lines below. Client further acknowledges that Client has received a copy of this Bankruptcy Retainer Agreement.

Dated: 12/29115

Rosalia Lope 7

Client Signature

Client Printed Name

Client Spouse Signature Client Spouse Printed Name

United States Bankruptcy Court Northern District of Illinois

In re	Rosalia Lopez		Case No.	
	·	Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR MA	TRIX	
		Number of C	Creditors: _	29
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my
Date:	April 13, 2016	/s/ Rosalia Lopez Rosalia Lopez Signature of Debtor		

Cap1/justice Capital One Retail Services Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Comenity Bank/Carsons Po Box 182125 Columbus, OH 43218

Comenity Bank/Harlem Furniture Po Box 182125 Columbus, OH 43218

Comenity Bank/New York & Company Po Box 182125 Columbus, OH 43218

Comenity Bank/vctrssec Po Box 182125 Columbus, OH 43218

Consumers Coop Cred Un Po Box 9119 Waukegan, IL 60079

Credit Acceptance 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034

Dominguez Housing LLC c/o Amy M. Mennecke 4212 Old Grand Ave., Suite 103 Gurnee, IL 60031 Erika Zavala 2138 Western Ave., Waukegan, IL 60085

Infinity Healthcare Physicians 111 E. Wisconsin Ave., Suite 2100 Milwaukee, WI 53202

Josefina Montero 4722 85th Street Kenosha, WI 53142

Kohls/Capital One Po Box 3120 Milwaukee, WI 53201

Lake County Acute Care, LLP 4350 Fowler Street, Suite 15 Fort Myers, FL 33901

Northshore Uni. Health Systems 23056 Network Place Chicago, IL 60673

Northshore Uni. Health Systems 23056 Network Place Chicago, IL 60673

Northshore Uni. Health Systems 23056 Network Place Chicago, IL 60673

Onemain Financial 6801 Colwell Blvd Ntsb-2320 Irving, TX 75039

Peoples Gas 200 E Randolph St 20th Floor Chicago, IL 60601

Springleaf Financial S 1828 Grand Ave Waukegan, IL 60085 Springleaf Financial S 1828 Grand Ave Waukegan, IL 60085

Syncb/toysrus Attn: Bankrupty Po Box 103104 Roswell, GA 30076

Synchrony Bank/ JC Penneys Attn: Bankrupty Po Box 103104 Roswell, GA 30076

Synchrony Bank/Sams Club Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

Synchrony Bank/TJX Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

Target C/O Financial & Retail Services Mailstop BT PO Box 9475 Minneapolis, MN 55440

United Collection Bureau, Inc. 4100 Horizons Drive, Suite 101 Columbus, OH 43220

United Hospital System 6308 Eight Avenue Kenosha, WI 53143-5082